

STATE ETHICS COMMISSION 1001 Bishop Street, Pacific Tower 970 P.O. Box 616, Honolulu, Hawaii 96809

Telephone: 587-0460 FAX: 587-0470

	GIFTS DISCLOSURE STATEMENT				
	period from June 1 of the preceding calendar year through June 1 of this				
NAME: Rowena N. A	kana	STATE POSITION: Trustee			
STATE AGENCY:		STATE TEL. NO.:			
Office of Hawaiian Affairs		(808) 594-1860			
STATE MAILING ADDRESS: 711 Kapiolan	ni Blvd., Honolulu, HI 96813				
1 DONOR	2 DESCRIPTION OF GIFT	DATE GIFT AGG. 3 REC'D 4 VALUE 5 VALUE			
N/A					
1					

1 DONOR	2 DESCRIPTION OF GIFT	DATE 3 REC'D	GIFT 4 VALUE	AGG. 5 VALUE
	RECEIVED			
	*04 JUN -1 A7:00			
	STATE OF HAWAII STATE ETHICS COMMISSION	ų.		
Check here if you have attached additional shee	ets.			

CERTIFICATION:	I hereby certify that the above is a true, correct, and complete statement.		
			-//
SIGNATURE:		DATE:	2/27/04